

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90239 034 ***150.00

DOCUMENT # P96000021364 (0) ✓

1. Corporation Name BRYSTE CARGO CONSOLIDATORS, INC.

Principal Place of Business 9740 SW 145th Avenue Miami FL 33186 Mailing Address SAME

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/08/1996

2. Principal Place of Business 9740 sw 145 Ave Suite, Apt. #, etc.

2a. Mailing Address 26 Same Suite, Apt. #, etc.

4. FEI Number 65-0647673 Applied For Not Applicable

22 City & State 23 Miami FLA

27 City & State 28

5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24 Zip 33186 25 SAUSA

29 Zip 30 Country

8. This corporation owes the current year intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent Luis F. Caceda 9740 SW 145th Avenue Miami FL 33186

10. Name and Address of New Registered Agent 81 Name Luis F. Caceda 82 Street Address (P.O. Box Number is Not Acceptable) 9740 SW 145th Avenue 83 Miami FL 33186 84 City Miami FL 85 Zip Code 33186

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 3/30/99

Table with 12 rows for Officers and Directors. Each row includes fields for Title, Name, Street Address, and City-ST-ZIP, with a 'DELETE' checkbox.

Table with 13 rows for Additions/Changes to Officers and Directors. Each row includes fields for Title, Name, Street Address, and City-ST-ZIP, with 'Change' and 'Addition' checkboxes.

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] 3/30/99 (305) 386-2261 Date Daytime Phone #

CR2E034 (1/98)